

1. Please join as a party claimant to this proceeding (*specify name of employee benefit plan*):

2. The pleading on joinder is submitted with this application for filing.

(SIGNATURE OF  ATTORNEY FOR)  
 PETITIONER  RESPONDENT

(TYPE OR PRINT NAME)

## ORDER OF JOINDER

- a. The claimant listed in item 1 is joined as a party claimant to this proceeding.
- b. The pleading on joinder be filed.
- c. Summons be issued.
- d. Claimant be served with a copy of the pleading on joinder, a copy of this request for joinder and order, the summons, and a blank *Notice of Appearance and Response of Employee Benefit Plan* (form FL-374).

Clerk, By \_\_\_\_\_, Deputy